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Certified Copies	Certificates	of Statue	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: PV1 LLC		
Name of Limited Liability Company	_	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida Existence, and check are submitted to register the above referenced foreign limited liability company to transact business."		
Please return all correspondence concerning this matter to the following:		
Jeremy Page	_	
Name of Person	-	
PV1 LLC		
Firm/Company	-	
6770 S. McCarran Blvd., Suite 202	_	
Address	. 29	
Reno, NV 89509	14 OC	
City/State and Zip Code	. 17	-
cbonnett@elevateig.com	-	
E-mail address: (to be used for future annual report notification)	- AM 10:	
For further information concerning this matter, please call:	<u></u>	giás M. man.
Christy Bonnett 775 200-7501	•	
Name of Contact Person Area Code Daytime Telephone Number	-	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: A\$125.00 Filing Fee Certificate of Status S155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Cert		ite

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate name adopted for the purpose of transac ability Company," "L.L.C," or "LLC.")	
Nevada 3. N	N/A
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S.	da, if prior to registration.) to determine penalty liability)
6770 S. McCarran Blvd., Suite 202	
Reno, NV 89505	
(Street Address of P	rincipal Office)
	Frish ST
	OCT
(Mailing Ac	ddress)
. The name, title or capacity and address of the person(s	a) who has/have authority to manager ware
	s) who has/have authority to manage is/a car
eremy Page, Manager	
	<u>, </u>
Attached is an original certificate of existence, no more	e than 90 days old, duly authenticated by the offic
wing custody of records in the jurisdiction under the law	w of which it is organized. (A photocopy is not
ceptable. If the certificate is in a foreign language, a tra	nslation of the certificate under oath of the transl
aust be submitted)	
	/ _
a: 14 c //	ithorized person
Signature of ad au accordance with section 605.0203, F.S., the execution of this document constitute aware that any false information submitted in a document to the Department of St	s an affirmation under the penalties of perjury that the facts stated herein
Signature of ad au accordance with section 605.0203, F.S., the execution of this document constitute in aware that any false information submitted in a document to the Department of St. Jeremy Page	s an affirmation under the penalties of perjury that the facts stated herein

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: PV1 LLC					
If unavailable, the alternate to be used in t	he state of Florida is:				
2. The name and the Florida street addres	s of the registered agent and office a	re:			
Brian Jacolio	ck	2014 OCT 27 SALLAHASS			
-	(Name)				
5959 Collins	Ave., #1502				
Florida Street A	Address (P.O. Box NOT ACCEPTABLE)	The second secon			
Miami Beach	33140 FL	AN IO: 14			
	City/State/Zip				

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, PV1 LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 20, 2011, and is in good standing in this state.

OF THE OWNER OWNER OF THE OWNER OWNE

Electronic Certificate
Certificate Number: C20141022-0517
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 22, 2014.

ROSS MILLER Secretary of State